

Notice of Agency Rule-making Proposal

AGENCY: Maine Department of Environmental Protection

RULE TITLE OR SUBJECT: Chapter 378 Variance Criteria for the Excavation of Rock, Borrow, Topsoil, Clay or Silt

PROPOSED RULE NUMBER: 98-P

(LEAVE BLANK - ASSIGNED BY SECRETARY OF STATE):

CONCISE SUMMARY (UNDERSTANDABLE BY AVERAGE CITIZEN):

Changes to Chapter 378 Variance Criteria for the Excavation of Rock, Borrow, Topsoil, Clay or Silt, are intended to: (1) allow the use of doubled walled fuel tanks for secondary containment; (2) update the performance standards for the storage of petroleum products for excavations; (3) to ensure consistency between regulatory programs, the proposed rule, the rule repeals the external drainage standards and submissions required under the Variance rule and replaces them with the standards and submissions contained in the Stormwater Rules, Chapter 500.

THIS RULE WILL__ WILL NOT_X_ HAVE A FISCAL IMPACT ON MUNICIPALITIES.

STATUTORY AUTHORITY: 38 MRSA §341-D; §490-E; §490-CC

PUBLIC HEARING): No public hearing is planned. A hearing may be requested by contacting:
Mark Stebbins, MDEP, 312 Canco Rd, Portland, ME 04103

DEADLINE FOR COMMENTS: 5:00 p.m., January 26, 2007.

Comments may be submitted by mail at the address below, by fax at (207)822-6303, or by e-mail at Mark.N.Stebbins@maine.gov. To ensure the comments are considered, they must include your name and the organization you represent, if any. Please be aware that the risk of non-delivery associated with submission by fax or e-mail is on the sender. A copy of the proposed rule is available upon request from the contact person below, and on the web at , see contact person below or go to: <http://www.maine.gov/dep/blwq/rule.htm>

AGENCY CONTACT PERSON: Mark Stebbins

AGENCY NAME: Department of Environmental Protection

ADDRESS: 312 Canco Road
Portland, Maine 04103

TELEPHONE: 207-822-6367; Mark.N.Stebbins@maine.gov; fax 822-6103

Please approve bottom portion of this form and
assign appropriate MFASIS number.

APPROVED FOR PAYMENT _____ DATE: _____
Authorized signature

FUND	AGENCY	ORG	APP	JOB	OBJT	AMOUNT
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